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**\*BIBDATASHEET\***

CONFIRMATION NO. 7816

Bib Data Sheet

<b>SERIAL NUMBER</b> 09/549,236	<b>FILING OR 371(c) DATE</b> 04/13/2000 <b>RULE</b>	<b>CLASS</b> 705	<b>GROUP ART UNIT</b> 3626	<b>ATTORNEY DOCKET NO.</b> AND1P405
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**\*\* CONTINUING DATA \*\*\*\*\*****\*\* FOREIGN APPLICATIONS \*\*\*\*\*****IF REQUIRED, FOREIGN FILING LICENSE GRANTED****\*\* 05/18/2000**

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> GA	<b>SHEETS DRAWING</b> 20	<b>TOTAL CLAIMS</b> 18	<b>INDEPENDENT CLAIMS</b> 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

**ADDRESS**

29838

**TITLE**

ERROR AND LOAD SUMMARY REPORTING IN A HEALTH CARE SOLUTION ENVIRONMENT

<b>FILING FEE RECEIVED</b> 1306	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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